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Breaking WEIGHT BIAS

Promoting Health without
harming through digital
training tools

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1. Weight Bias

1.1. Definitions of weight bias, stigma, discrimination & internalised weight bias





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TRAINING CONTENT

Learning Objectives

By reading this module, health care professionals will:

- understand the meaning of weight bias, weight stigma, weight discrimination, and internalised weight bias;
- recognise the main sources of weight bias and become aware of its alarming increase,
- become familiar with the most wide-spread misconceptions about weight and people with obesity;
- realise the negative effects of weight bias on physical, mental, and public health.

1.1. Definitions of weight bias, stigma, discrimination & internalised weight bias

Despite modernity and the numerous advancements in social struggles, several social issues remain relevant today and expose an inequitable society. Misguided perceptions, ignorance, and ill-intentioned attitudes towards diversity are all signs of problematic societal structures that eventually deprive many people of the right to equality and tolerance. This is the case with people who are being judged and discriminated against based on their weight.

Weight bias refers to negative preconceptions, assumptions and associations linked with the issue of an individual's weight.

“Examples of explicit weight bias include assumptions that people living with obesity are lazy, unmotivated, lacking self-discipline or willpower and are noncompliant with medical treatment” (Kirk et al., 2020, p. 3)

Such fixed ideas can determine people's attitudes, whether they realise it (*explicit* weight bias) or not (*implicit* weight bias). Misconceptions about weight form and sustain “stereotypes and/or prejudice towards people with overweight and obesity” (WHO, 2021). As a result, people with overweight and/or obesity are stigmatised in society and suffer the stigma's discriminatory consequences.

Stigma is the social label that is assigned to individuals or groups of people when prejudice and ignorance occur. Social labels are very powerful, as they dictate behaviours that promote *exclusion, marginalisation and inequality* in every aspect of societal life. For instance, the obesity stigma is not only a matter of opinion: it leads to



harmful and discriminatory actions that deprive people with obesity of basic rights thus offending democratic practices: in many instances, people with obesity are deprived of the right to equal healthcare, the right to equal treatment in the workplace or in education, etc.

As research shows, weight bias, stigma and the resulting discrimination are increasingly high in Western societies. As per commonly accepted definitions, the word discrimination refers to *actions, practices, or policies* related to a *perceived* categorisation of a social group as *significant* in social contexts (Altman, 2020). As much as any kind of discrimination, weight discrimination is an unjust rejection of diversity and inclusion.

Contrarily to other types of discrimination like gender or race discrimination, no legal sanctions have been established to prevent weight discrimination. As a result, society lacks adequate *bias-prevention programmes* and other *legal or practical remedies* that would somehow limit the extent of disproportionately disadvantaged groups of people (Andreyeva et al., 2008). Subsequently, weight discrimination is hard to be measured in prevalence compared to other types of discrimination, and concerned individuals remain vulnerable and exposed to injustices.

This phenomenon affects all life domains - namely employment, education, healthcare, and interpersonal relationships, thus severely interfering with people's *physical, psychological and psychosocial* well-being (Kirk et al., 2020, p. 3). Weight stigma is known to cause various health and mental health issues and research shows that it is prevalent in people *of all body sizes* in Western societies (Prunty et al., 2020). This is mainly because of cultural standards, norms, and expectations that link weight with specific categorisations of what is acceptable, beautiful, preferable, trendy, etc.

When society acts on such a discriminatory basis forcing people to experience tangible harmful results, it promotes specific *interpretations of body weight* which, in turn, ensure social consequences and pressure for anyone that does not meet the ideal standards (Sobal & Maurer, 2017).

The terms 'perceived bias' and 'perceived discrimination' refer to how people perceive and experience discriminatory behaviours (Andreyeva et al., 2008). Experiencing this kind of victimhood is not the result of health-related interpretations. Rather it is the result of socially constructed labels and interpretations that preserve social division and hinder the cultivation of any corresponding social support. This happens through the prism of a "social ideal of physical appearance" that weighs heavily on people's lives and mentalities (Gash, 2021). The problem is accentuated by the propagation of relative *popular narratives* that reproduce false or unrealistic ideas about physical appearance (WHO, 2021).



Research shows that, especially in the cases where people are blamed for their deviation from the socially accepted norm, weight bias and perceived discrimination are present in higher levels (Andreyeva et al., 2008).

Social and cultural pressures are also responsible for internalised weight bias. The term 'internalised weight bias' refers to the negative beliefs that a person cultivates about their proper Self based on their *weight or size* (WHO, 2021). These negative beliefs are associated with sociodemographic factors but are mainly enhanced by the idea of *controllability of body weight* (Prunty et al., 2020). The idea of responsibility and the sense of shame for deviating from the norm perpetuate *self-blame* attitudes over *perceived inadequacies* (Formica, 2013).



EXTERNAL RESOURCES

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